Case 3:17-cv-05837-WHO Document 10 Filed 11/03/17 Page 1 of 2 USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF CARL ALEXANDER		COURT CASE NUMBER 3:17-cv-05837-SK				
DEFENDANT	TYPE OF PROCESS	TYPE OF PROCESS				
MONETTE STEPHENS, et	Summons, Compl	Summons, Complaint & Orders				
NAME OF INDIV	VIDUAL, COMPANY, COF	RPORATION, ETC.	TO SERVE OR DESC	RIPTION OF PROPERTY	O SEIZE OR CONDEMN	
SERVE Monette Step						
	et or RFD, Apartment No., C	ity, State and ZIP Co	ode)			
	Street, San Francisco	o, California 941	117-4418			
END NOTICE OF SERVICE COPY	Y TO REQUESTER AT NA	Number of process to be				
	•		served with this Form 285	4		
Carl Alexander W	escott. Pro per	Armst A.	R. Beerel Breeze	Number of parties to be		
P.O. Box 190875		LED	served in this case	2		
San Francisco, CA	. 94119		6			
		NOV	_ 3 2017	Check for service on U.S.A.		
SPECIAL INSTRUCTIONS OR OT All Telephone Numbers, and Estim	THER INFORMATION TH	AT WILL ASSIST	N EXPERIME SER	VICE (<u>Include Business and</u>	Alternate Addresses,	
All Telephone Numbers, and Estim	ated Times Available for Se	ervice ORTHERN DIS	STRICT OF CALIFORNA	i .	Fold	
5			5		4 	
			a	~		
a a						
- 1						
	.160				D. 1777	
ignature of Attorney other Originate		ELEPHONE NUMBER	DATE			
	THELMA NUDO		DEFENDANT	(415) 522-2067	10/19/17	
SPACE BELOW FOR	R USE OF U.S. M	ARSHAL O	NLY DO NO	T WRITE BELOV	W THIS LINE	
I acknowledge receipt for the total	Total Process District of	f District to Serve	Signature of Authori	ed USMS Deputy or Clerk	Date	
number of process indicated. (Sign only for USM 285 if more	Origin		Cu label			
than one USM 285 is submitted)	No	No			10/30/1	
I hereby certify and return that I	have personally served.	have legal evidence	e of service, have e	xecuted as shown in "Remai	ks", the process described	
on the individual, company, corpora	ation, etc., at the address sho	own above on the on	the individual, compa	ny, corporation, etc. shown at	the address inserted below.	
☐ I hereby certify and return that	I am unable to locate the ind	lividual, company, c	orporation, etc. named	above (See remarks below)		
Name and title of individual served				A person of si	uitable age and discretion	
Nume und thie of many and serves	then residing	then residing in defendant's usual place				
				of abode	Time	
Address (complete only different that	ın shown above)			Date	□ a	
					□. p	
				Signature of U.S.	Marshal or Deputy	
				-		
Service Fee Total Mileage C	Charges Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Man	rshal* or	
including endea		3 3 3 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4		(Amount of Refund*)		
				\$0	.00	
DELICI DICC		l				
REMARKS:						
	OF THE COURT			PRIC	R EDITIONS MAY BE US	
2. USMS RE	CORD					

2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00

Case 3:17-cv-05837-WHO Document 10 Filed 11/03/17 Page 2 of 2 USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

I A DIMINI					C	OURT CASE NUMB	FR		
CARL ALEXANDER WESCOTT PM 12: 59					100	3:17-cv-05837-SK			
DEFENDANT						TYPE OF PROCESS			
MONETTE STEPHENS, et al RIHERN DISTRICT						Summons, Complaint & Orders			
NA	ME OF INDIVIDUA	L, COMPANY, COR	PORATION. ETC.	TO SERVE OR DES	CRIPTIO	N OF PROPERTY TO	SEIZE O	R CONDEMN	
SERVE M	lichelle Harris, Es	sq.							
	DRESS (Street or RF								
	rris Family Law,				sco, Cali	fornia 94111			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW					Number of process to be served with this Form 285 4				
	Carl Alexander Wescott, Pro per P.O. Box 190875 San Francisco, CA 94119					Served with this rollin 200			
						Number of parties to be served in this case			
1						for service S.A.			
L					ļ		ļ		
SPECIAL INSTRUCT	TIONS OR OTHER I	NFORMATION THA	T WILL ASSIST I? rvice):	N EXPEDITING SE	RVICE (<u>In</u>	clude Business and A	liternate A	laaresses,	
Au Telephone Numb	ers, and Estimated 11	mes / r minore y or se.						Fold	
ti.									
Signature of Attorney	other Originator reque	her Originator requesting service on behalf of:			TELEPHONE NUMBER		DATE		
DEFENDANT					(415) 522-2067			9/17	
~~ . ~~ PEY		HELMA NUDO	THE RESERVE ASSESSMENT AND ADDRESS OF THE PARTY OF THE PA	UV DONO			THIS	LINE	
SPACE BEL	OW FOR US			NAME AND ADDRESS OF TAXABLE PARTY AND PERSONS ASSESSED.		RITE BELOW	11110	Date	
I acknowledge receipt number of process ind		Total Process District of District to Signature of A			horized USMS Deputy or Clerk			Date	
(Sign only for USM 28	85 if more	H 1. 11	11		les !			10/31/1	
than one USM 285 is		No	No		rs.			1 3 1	
I hereby certify and re on the individual, cor	eturn that I have p	ersonally served,	have legal evidence	of service, L have	executed any, corpo	as shown in "Remarks ration, etc. shown at the	s", the pro he address	inserted below.	
	and return that I am un		vidual, company, co	orporation, etc. named	1 40000 (5		tabla aga a	nd discretion	
Name and title of individual served (if not shown above)						A person of suitable age and discretion then residing in defendant's usual place of abode			
Address (complete on	ly different than show	n above)				Date	Time	П.	
saites (complete on	, , ,	and a superior of the superior						□ a □ p	
						Signature of U.S. M	forchal or I	Denuty	
						Signature of O.S. W.	iaisiiai oi i	эсрагу	
		F 1' 5	Total Char	Advance Deposits	Amou	nt owed to U.S. Marsh	hal* or		
	tal Mileage Charges Forwarding Fee Total Charges Advance Deposits					(Amount of Refund*)			
						\$0.0	\$0.00		
DEMARKS									
REMARKS:									
×						DDIOD	EDITION	IS MAY BE USI	
PRINT 5 COPIES:	1. CLERK OF THE 2. USMS RECORD					NON	LDITION		

- 3. NOTICE OF SERVICE
- NOTICE OF SERVICE
 HELLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00